

Letter of Appeal for Enhanced Workplace Accommodations

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Employer's Name]

[Company's Name]

[Company's Address]

[City, State, Zip Code]

Dear [Employer's Name],

I hope this message finds you well. I am writing to formally appeal the decision regarding my request for enhanced workplace accommodations as part of my job application for the position of [Job Title] at [Company's Name].

As an individual with [briefly explain your circumstance/disability], I am committed to performing my best work. However, I believe that specific enhancements to the accommodations provided would allow me to contribute even more effectively to the team and the organization's goals.

I would like to propose the following enhancements to my previous request:

- [Accommodation 1]
- [Accommodation 2]
- [Accommodation 3]

I truly believe that these accommodations will not only support my individual needs but will also enhance the overall productivity and work environment of the team. I am eager to join [Company's Name] and contribute positively while thriving in a supportive workplace.

Thank you for considering my appeal. I look forward to discussing this further and hope to reach an understanding that ultimately benefits all parties involved.

Sincerely,

[Your Name]